



05-02-03

2823
AB

PATENT

Attorney Docket No. MTI-31533

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of : Ammar Derra
Serial No. : 09/941,533
Filing Date : August 29, 2001
For : Method of Forming Conductive Contact
Group Art Unit : 2823
Examiner : Fourson III, George R.
Confirmation No. : 4578

CERTIFICATION UNDER 37 CFR 1.8(a) and 1.10

I hereby certify that, on the date shown below, this correspondence is being:

Mailing

deposited with the United States Postal Service in an envelope addressed to the Assistant Commissioner for Patents,
Washington, D.C. 20231

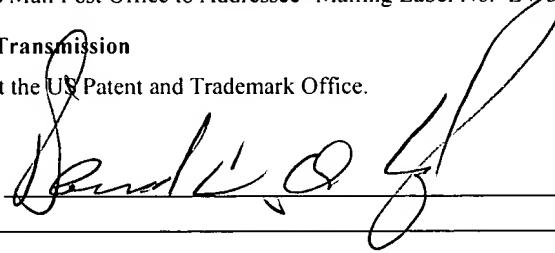
37 CFR 1.8(a)

37 CFR 1.10

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Transmission

transmitted by facsimile to Examiner _____ at _____ at the US Patent and Trademark Office.

Date: May 1, 2003 

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL

1. Transmitted herewith is:

Response

Replacement claims (22 sheets)

Supplemental IDS with (substitute) Form 1449 and references

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STATUS

2. Applicant is a large entity.

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply.

Applicant believes that no extension of term is required. However, if an extension of time is required, please consider this a petition therefor.

Applicant petitions for an extension of time under 37 C.F.R. ' 1.136 for the total number of months checked below [fees: 37 C.F.R. ' 1.17(a)(1)-(4)] :

Extension (months)	Fee for other than <u>small entity</u>	Fee for <u>small entity</u>
[] one month	\$ 110.00	\$ 55.00
[] two months	\$ 390.00	\$ 195.00
[] three months	\$ 890.00	\$ 445.00
[] four months	\$ 1,390.00	\$ 695.00
		Fee: <u>\$0.00</u>

If an additional extension of time is required, please consider this a petition therefor.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

Claims Remaining After Amendment		Highest No. Previously Paid For	Rate (Small Entity)	Additional Fee or	Rate (Large Entity)	Additional Fee
Total 102	Minus	100	= x 9= \$	\$	2 x 18	\$ 36.00
Independent 40	Minus	25	= x 39= \$	\$	15 x 84	\$ 1,260.00

FIRST PRESENTATION OF MULTIPLE DEP CLAIM

TOTAL
ADDIT. Fee \$ **1,296.00** or **TOTAL
ADDIT. Fee \$ 1,296.00**

c. [] No additional fee for claims is required.

d. [X] Total additional fee for claims required **\$ 1,296.00**

FEE DEFICIENCY

5. [X] If any additional extension and/or fee is required, charge Account No. 23-2053.
 If any additional fee for claims is required, charge Account No. 23-2053.

Date: May 1, 2003

Kristine M. Strothoff
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